## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO4			
101	51	7133	3
A DDL LC L LOW	C)		

FILING DATE

APPLICANT(S)

## **CLAIMS**

	AS FILED		AFTER 1"AMENDMENT			TER ndment
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5				<b></b>		
6						
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9				HH		
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11 12				<del>    .  </del>		
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18			- 1		_	
19					_	
20						
21		tr Table		$P_{ij}(k) = 1$		
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39						
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43			-			<u></u>
45						
45						<del></del>
47			-			
48						-
49						
50						
TOTAL IND.		+	3.	+		+
TOTAL DEP.		<b>4</b>	19	<b>(-</b>		<b>(=</b>
TOTAL			22			
CLAIMS			a de			

PTO - 1360 (REV. 11/04)

	AS FILED		AFTER 1*AMENDMENT		AFTER 2 ** AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54 55	<del> </del>					
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60 61						
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86 87						<u> </u>
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92 93						
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99 100						
TOTAL IND.		1		1	7	1
TOTAL DEP		<b>4</b>		<b>(</b>		<b>(=</b>
TOTAL CLAIMS						1999
		U.S. DEPART	IMENT of CO	OMMERCE	****	

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